

CHARGE OF DISCRIMINATION

Case# E-201cv-1099-DAR Doc# 29-5 Filed: 09/20/21 1 of 3. PageID #: 180

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AGENCY

CHARGE NUMBER

<input type="checkbox"/>	FEPA
<input checked="" type="checkbox"/>	EEOC

and EEOC

State or local Agency, if any

S.S. No.

283822066

NAME (Indicate Mr., Ms., Mrs.)

Yazmin Torres

HOME TELEPHONE (Include Area Code)

440.823.2245

STREET ADDRESS

7389 Tattersall Drive

CITY, STATE AND ZIP CODE

Chesterland, Ohio 44026

DATE OF BIRTH

7/19/1984

NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY, APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)

NAME

University Hospitals of Cleveland

NUMBER OF EMPLOYEES, MEMBERS

>50

TELEPHONE (Include Area Code)

STREET ADDRESS

3605 Warrensville Center Road

CITY, STATE AND ZIP CODE

Shaker Heights, Ohio 44122-5203

COUNTY

Cuyahoga

NAME

TELEPHONE NUMBER (Include Area Code)

STREET ADDRESS

CITY, STATE AND ZIP CODE

COUNTY

CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))

DATE DISCRIMINATION TOOK PLACE
EARLIEST (ADEA/EPA) LATEST (ALL)

02/16/2016

 RACE COLOR SEX RELIGION AGE RETALIATION NATIONAL

ORIGIN

 DISABILITY OTHER (Specify) CONTINUING ACTION

THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):

See attached.

I want this charge filed with both the EEOC and the State or local Agency, if any.
 I will advise the agencies if I change my address or telephone number and I will
 cooperate fully with them in the processing of my charge in accordance with their
 procedures.

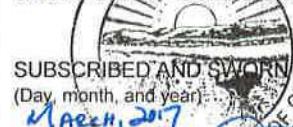
NOTARY - (When necessary for State and Local Requirements)


 3-15-17

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. K. Y. Torres

I declare under penalty of perjury that the foregoing is true and correct.

SIGNATURE OF COMPLAINANT



SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE

(Day, month, and year)

March 11, 2017

NOTARY PUBL. C

STATE OF OHIO

15th of

My Commission Expires

March 28,

Date

Charging Party (Signature)

STATE OF OHIO :

: : : : **AFFIDAVIT OF YAZMIN TORRES**

COUNTY OF CUYAHOGA, SS:

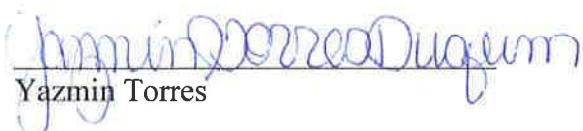
NOW COMES Yazmin Torres, who, having first been duly sworn according to law, deposes and says:

1. I have a pending charge with this agency against my former employer, University Hospitals, UH Rehabilitation and Sports Medicine.
2. As explained in my first charge, I was employed by University Hospitals, UH Rehabilitation and Sports Medicine, since May 2011. I am a licensed physical therapist. I worked at the Beachwood JCC location.
3. I suffer from a disability, and on February 11, 2016, I requested a transfer to a different work location as a reasonable accommodation of my disability. I renewed my request several times, and provided medical certification explaining my disability and need for accommodation.
4. UH neither granted my request nor engaged in the interactive process with me. I was on leave from UH when I filed my first charge.
5. From the time I requested the transfer, I searched the UH online job postings and sought a position at a different location on my own without the help of the UH human resources department.
6. On December 5, 2016, University Hospitals, St. John Medical Center offered me a position as a physical therapist, PRN shift. My offer letter is attached as Exhibit 1.
7. I was told that the PRN shift typically worked between 24-26 hours weekly. I was told to attend orientation on January 10 and 11, 2017, which I did. I was told that I would be placed on the schedule after my orientation.
8. I filed my charge against UH on December 5, 2016. UH obviously received a copy of my charge sometime after it offered me the position at St. John Medical Center.
9. On January 3, 2017, UH notified me that I was terminated and provided a COBRA notice that my health care was terminated unless I elected to pay the full cost.
10. UH has not assigned me to work at all in the PRN position. On January 17, 2017, my supervisor told me she expected to need me for coverage January 30-February 3, 2017. I told her I would be ready to work that week, but on January 25, 2017, she emailed me that I was not needed. On February 6, 2017, I sent another email to my supervisor asking

if she needed me, and she responded, “We are fully staffed at this time. Starting to pick up from the January slump. I’ll keep you posted!” This email exchange is attached as Exhibit 2.

11. UH St. John Medical Center posted an opening for a PRN Physical Therapist on February 3, 2017. In other words, three days after my supervisor told me they were “fully staffed,” they posted an opening for the PRN position. A copy of the job posting is attached as Exhibit 3.
12. I believe that UH St. John Medical Center has refused to schedule me in retaliation for my charge of discrimination and/or because of my disability.

Further affiant sayeth naught.


Yazmin Torres

Sworn to before me and subscribed in my presence this 10th day of March 2017.



Notary Public

CATHLEEN M. BOLEK, ATTORNEY
NOTARY PUBLIC • STATE OF OHIO
My commission has no expiration date
Section 147.03 O.R.C.